Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: OPTICAL UNIT FOR A MOTOR

VEHICLE

Attorney Docket Number:: 0512-1018

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: SEBASTIEN

Middle Name::

Family Name:: BERNE

City of Residence:: MONTBELIARD

State or Province of

Residence::

Country of Residence:: FRANCE
Street of Mailing 20 RUE VELOTTE

Address::

City of Mailing Address:: MONTBELIARD

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: 25200

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: CAROLINE

Middle Name::

Family Name:: RIVIERE

City of Residence:: VALENTIGNEY

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 41 RUE DES GRAVIERS

Address::

City of Mailing Address:: VALENTIGNEY

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

FRANCE

| Postal | or | Zip | Code | of | Mailing | Address:: | 25700 |
|--------|----|-----|------|----|---------|-----------|-------|
|--------|----|-----|------|----|---------|-----------|-------|

Correspondence Information

Correspondence Customer

000466

Number::

Representative Information

| Representative Customer | 000466 |
|-------------------------|--------|
| Number:: | |

Domestic Priority Information

| Application:: | Continuity | Parent | Parent Filing |
|---------------|------------|---------------|---------------|
| • | Type:: | Application:: | Date:: |
| | | | |
| | | | |

Foreign Priority Information

| Country:: | Application | Filing Date:: | Priority |
|-----------|-------------|---------------|-----------|
| | Number:: | | Claimed:: |
| FRANCE | 01 02754 | 2/28/01 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::